

104TH CONGRESS
1ST SESSION

H. R. 2245

To establish a national program of trained community health advisors to assist the States in attaining the Healthy People 2000 Objectives.

IN THE HOUSE OF REPRESENTATIVES

AUGUST 4, 1995

Mr. SANDERS (for himself and Mr. ROGERS) introduced the following bill;
which was referred to the Committee on Commerce

A BILL

To establish a national program of trained community health advisors to assist the States in attaining the Healthy People 2000 Objectives.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “National Community
5 Health Advisor Act”.

6 **SEC. 2. FINDINGS.**

7 The Congress finds as follows:

8 (1) Communities across America have joined
9 forces with State health departments, academic in-
10 stitutions, and community-based public and non-

1 profit organizations to improve the health of their
2 neighborhoods and help us as a Nation reach the
3 Healthy People 2000 objectives.

4 (2) Recognizing the difficult barriers confront-
5 ing their medically underserved communities—pov-
6 erty, geographic isolation, cultural differences, lack
7 of transportation, low literacy, and lack of access to
8 services—community leaders are becoming bridges
9 between their communities and local health and so-
10 cial service providers to break down these barriers.

11 (3) These community leaders, often referred to
12 as community health advisors, are uniquely knowl-
13 edgeable about their communities' needs.

14 (4) Community health advisors can commu-
15 nicate to health and social service providers the
16 needs of community members, provide quality health
17 promotion and disease prevention information to the
18 community, and serve as the crucial link between
19 their community and service providers.

20 (5) Community health advisors can increase uti-
21 lization of available preventive health services, in-
22 crease the effectiveness of the health care delivery
23 system, reduce preventable morbidity and mortality,
24 and improve the quality of life of their neighbors.

1 (6) Community health advisors can be a critical
2 part of our national challenge to meet the Healthy
3 People 2000 vision for the new century.

4 **SEC. 3. DEFINITIONS.**

5 For purposes of this Act:

6 (1) The term “authorized program services”,
7 with respect to a community health advisor program,
8 means the services authorized in section 5(a) to be
9 included in a plan under such section.

10 (2) The term “community health advisor”
11 means an individual—

12 (A) who has demonstrated the capacity to
13 carry out one or more of the authorized pro-
14 gram services;

15 (B) who, for not less than 1 year, has been
16 a resident of the community in which the com-
17 munity health advisor program involved is to be
18 operated; and

19 (C) is a member of the target population
20 to be served by the program.

21 (3) The term “community health advisor pro-
22 gram” means a program carried out in accordance
23 with a plan under section 5(a).

1 (4) The term “financial assistance”, with re-
2 spect to an award under section 4, means a grant,
3 cooperative agreement, or a contract.

4 (5) The term “Healthy People 2000 Objectives”
5 means the objectives established by the Secretary to-
6 ward the goals of increasing the span of healthy life,
7 reducing health disparities among various popu-
8 lations, and providing access to preventive services,
9 which objectives apply to the health status of the
10 population of the United States for the year 2000.

11 (6) The term “medically underserved commu-
12 nity” means—

13 (A) a community that has a substantial
14 number of individuals who are members of a
15 medically underserved population, as defined in
16 section 330 of the Public Health Service Act; or

17 (B) a community a significant portion of
18 which is a health professional shortage area
19 designated under section 332 of such Act.

20 (7) The term “official poverty line” means the
21 official poverty line established by the Director of
22 the Office of Management and Budget and revised
23 by the Secretary in accordance with section 673(2)
24 of the Omnibus Budget Reconciliation Act of 1981,

1 which poverty line is applicable the size of the family
2 involved.

3 (8) The term “Secretary” means the Secretary
4 of Health and Human Services.

5 (9) The term “State” means each of the several
6 States, the District of Columbia, and each of the
7 Commonwealth of Puerto Rico, American Samoa,
8 Guam, the Commonwealth of the Northern Mariana
9 Islands, the Virgin Islands, and the Trust Territory
10 of the Pacific Islands.

11 (10) The term “State involved”, with respect to
12 an applicant for an award under section 4, means
13 the State in which the applicant is to carry out a
14 community health advisor program.

15 **SEC. 4. FORMULA GRANTS REGARDING COMMUNITY**
16 **HEALTH ADVISOR PROGRAMS.**

17 (a) FORMULA GRANTS.—In the case of each State
18 (or entity designated by a State under subsection (c)) that
19 submits to the Secretary a plan in accordance with section
20 5(a) for a fiscal year, the Secretary of Health and Human
21 Services, acting through the Director of the Centers for
22 Disease Control and Prevention and in coordination with
23 the heads of the agencies specified in subsection (b), shall
24 make an award of financial assistance to the State or en-
25 tity for the development and operation of community

1 health advisor programs under the plan. The award shall
2 consist of the allotment determined under section 7 with
3 respect to the State, subject to section 11(b).

4 (b) COORDINATION WITH OTHER AGENCIES.—The
5 agencies referred to in subsection (a) regarding coordina-
6 tion are the Health Resources and Services Administra-
7 tion, the National Institutes of Health, and the Substance
8 Abuse and Mental Health Services Administration.

9 (c) DESIGNATED ENTITIES.—With respect to the
10 State involved, an entity other than the State may receive
11 an award under subsection (a) only if the entity—

12 (1) is a public or nonprofit private academic or-
13 ganization (or other public or nonprofit private en-
14 tity); and

15 (2) has been designated by the State to carry
16 out the purpose described in such subsection in the
17 State and to receive amounts under such subsection
18 in lieu of the State.

19 **SEC. 5. STATE PLAN.**

20 (a) IN GENERAL.—An applicant for an award under
21 section 4 for a fiscal year may receive such an award only
22 if the applicant submits to the Secretary a plan for such
23 year that is in such form, is made in such manner, and
24 is submitted at such time as the Secretary may require,
25 and that meets the following requirements:

1 (1) The plan contains a description of how—

2 (A) if the applicant is a State, the award
3 will be administered by the State agency with
4 the principal responsibility for carrying out
5 public health programs; and

6 (B) if the applicant is an entity designated
7 under section 4, the award will be administered
8 in consultation with such State agency.

9 (2)(A) The plan contains a description of how
10 the applicant will—

11 (i) operate a clearinghouse to maintain and
12 disseminate information on community health
13 advisor programs (and similar programs) in the
14 State;

15 (ii) provide to community health advisor
16 programs in the State technical assistance in
17 training community health advisors; and

18 (iii) provide to community health advisor
19 programs in the State evaluation assistance in
20 evaluating their community health advisor pro-
21 grams and preparing the reports required in
22 paragraph (22); and

23 (B) The plan contains assurances that—

24 (i) not more than 15 percent of the award
25 will be expended in the aggregate for carrying

1 out subparagraph (A) and for the expenses of
2 administering the award with respect to the
3 State involved; and

4 (ii) the remainder of the award will be pro-
5 vided directly to community health advisor pro-
6 grams in the State for carrying out the duties
7 of the programs pursuant to this subsection.

8 (3) The plan contains a description of how the
9 applicant will use the award, including the following:

10 (A) description of the criteria the applicant
11 will use to identify which community-based pub-
12 lic and private nonprofit entities will receive
13 funds from the award and how the funds will
14 be allocated among such public and private non-
15 profit entities.

16 (B) A description of how the award will as-
17 sist the State involved in attaining the Healthy
18 People 2000 Objectives.

19 (C) Assurances that for each community
20 health advisor program operated with the
21 award, a program is carried out to train com-
22 munity health advisors to provide the author-
23 ized program services.

24 (D) Assurances that, for each community
25 health advisor program operated with the

1 award, a program of evaluation will be carried
2 out.

3 (E) A description of how the applicant will
4 identify and consider the needs of the commu-
5 nity involved for the authorized program serv-
6 ices.

7 (F) Assurances that each community
8 health advisor program operated with the award
9 will be provided in the cultural context most ap-
10 propriate for the individuals served by the pro-
11 gram.

12 (G) A description of how the applicant will
13 provide public education on health promotion
14 and disease prevention and facilitate the use of
15 available health services and health-related so-
16 cial services.

17 (H) A description of how the applicant will
18 provide health-related counseling.

19 (I) A description of how the applicant will
20 collaborate with and provide referrals for avail-
21 able health services and health-related social
22 services.

23 (J) Assurances that, with respect to the
24 purposes for the award is authorized to be ex-
25 pended, the State involved will maintain ex-

1 penditures of non-Federal amounts for such
2 purposes at a level that is not less than the
3 level of such expenditures maintained by the
4 State for the fiscal year preceding the first fis-
5 cal year for which such an award is made with
6 respect to the State.

7 (K) Assurances that not more than 15 per-
8 cent of the award will be expended for the pro-
9 gram of training under subparagraph (C).

10 (L) Assurances that the applicant will not
11 provide amounts from the award to a commu-
12 nity-based public and private nonprofit entity to
13 operate a community health advisor program
14 unless the entity complies with section 6.

15 (M) Assurances that the applicant will
16 carry out community health advisor programs
17 in accordance with the guidelines established
18 under section 8.

19 (N) Such other information as the Sec-
20 retary may require.

21 (b) CERTAIN EXPENDITURES.—An award under sec-
22 tion 4 may be expended to provide compensation for the
23 services of community health advisors.

1 **SEC. 6. LOCAL PLAN.**

2 A community-based public or private nonprofit entity
3 may receive funds from an award under section 4 for a
4 fiscal year to operate a community health advisor program
5 only if the entity submits to the recipient of such award
6 a plan for such year that is in such form, is made in such
7 manner, and is submitted at such time as the recipient
8 may require.

9 **SEC. 7. DETERMINATION OF AMOUNT OF ALLOTMENT.**

10 (a) IN GENERAL.—For purposes of section 4(a), the
11 allotment under this section with respect to a State for
12 a fiscal year is the greater of—

13 (1) the sum of the respective amounts deter-
14 mined for the State under subsection (b) and sub-
15 section (c); and

16 (2) \$500,000.

17 (b) AMOUNT RELATING TO POPULATION.—For pur-
18 poses of subsection (a), the amount determined under this
19 subsection is the product of—

20 (1) an amount equal to 50 percent of the
21 amount appropriated under section 11 for the fiscal
22 year and available for awards under section 4; and

23 (2) the percentage constituted by the ratio of—

24 (A) the number of individuals residing in
25 the State involved; to

1 (B) the sum of the respective amounts de-
2 termined for each State under subparagraph
3 (A).

4 (c) AMOUNT RELATING TO POVERTY LEVEL.—For
5 purposes of subsection (a), the amount determined under
6 this subsection is the product of—

7 (1) the amount determined under subsection
8 (b)(1); and

9 (2) the percentage constituted by the ratio of—

10 (A) the number of individuals residing in
11 the State whose income is at or below an
12 amount equal to 200 percent of the official pov-
13 erty line; to

14 (B) the sum of the respective amounts de-
15 termined for each State under subparagraph
16 (A).

17 **SEC. 8. QUALITY ASSURANCE; COST-EFFECTIVENESS.**

18 The Secretary shall establish guidelines for assuring
19 the quality of community health advisor programs (includ-
20 ing quality in the training of community health advisors)
21 and for assuring the cost-effectiveness of the programs.

22 **SEC. 9. EVALUATIONS; TECHNICAL ASSISTANCE.**

23 (a) EVALUATIONS.—The Secretary shall conduct
24 evaluations of community health advisor programs, and
25 disseminate information developed as a result of the eval-

uations. In conducting such evaluations, the Secretary shall determine whether the programs are in compliance with the guidelines established under section 8.

(b) TECHNICAL ASSISTANCE.—The Secretary may provide technical assistance to recipients of awards under section 4 with respect to the planning, development, and operation of community health advisor programs.

(c) GRANTS AND CONTRACTS.—The Secretary may carry out this section directly or through grants, cooperative agreements, or contracts.

(d) LIMITATION ON EXPENDITURES.—Of the amounts appropriated under section 11 for a fiscal year, the Secretary may reserve not more than 5 percent for carrying out this section.

**SEC. 10. RULE OF CONSTRUCTION REGARDING PROGRAMS
OF INDIAN HEALTH SERVICE.**

This Act may not be construed as requiring the Secretary to modify or terminate the program carried out by the Director of the Indian Health Service and designated by such Director as the Community Health Representative Program. The Secretary shall ensure that support for such Program is not supplanted by awards under section 4. In communities in which both such Program and a community health advisor program are being carried out, the Secretary shall ensure that the community health advisor pro-

1 gram works in cooperation with, and as a complement to,
2 the Community Health Representative Program.

3 **SEC. 11. FUNDING.**

4 (a) AUTHORIZATION OF APPROPRIATIONS.—For the
5 purpose of carrying out this Act, there are authorized to
6 be appropriated such sums as may be necessary for each
7 of the fiscal years 1996 through 2001.

8 (b) EFFECT OF INSUFFICIENT APPROPRIATIONS FOR
9 MINIMUM ALLOTMENTS.—

10 (1) IN GENERAL.—If the amounts made avail-
11 able under subsection (a) for a fiscal year are insuf-
12 ficient for providing each State (or entity designated
13 by the State pursuant to section 4, as the case may
14 be) with an award under section 4 in an amount
15 equal to or greater than the amount specified in sec-
16 tion 7(a)(2), the Secretary shall, from such amounts
17 as are made available under subsection (a), make
18 such awards on a discretionary basis.

19 (2) RULE OF CONSTRUCTION.—For purposes of
20 paragraph (1), awards under section 4 are made on
21 a discretionary basis if the Secretary determines
22 which States (or entities designated by States pursu-
23 ant to such section, as the case may be) are to re-
24 ceive such awards, subject to meeting the require-

- 1 ments of this subtitle for such an award, and the
- 2 Secretary determines the amount of such awards.

